

CREDIT HISTORY WORKSHEET

Applicant _____

SSN _____

Co-applicant _____

SSN _____

Section A - Credit Review

App

Co-app

- | | | |
|---|--|--|
| 1. Has the applicant used secured or unsecured credit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Has the applicant had other financial obligations during the last 3 years (rent, utilities, medical, etc.)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Are there any accounts that are or have been 30 days or more delinquent during the last 12 months? (If yes, complete Section B) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Does the applicant's credit history over the last 36 months contain any of the following events: foreclosure, bankruptcy, judgments? (If yes, complete section C) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Does the applicant's credit history indicate any court created or affirmed obligations (judgments) caused by nonpayment that have been within the last 12 months or are currently outstanding? (If yes, complete section D) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. Does the applicant have an outstanding tax lien or a delinquent government loan with no satisfactory arrangements for payments? (If yes, complete section D) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. Are there any outstanding judgments against the applicant obtained by the United States in a Federal court (other than the United States tax court)? (If yes and if the Administrator has waived the automatic rejection of an application due to outstanding Federal judgments, complete section C) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. Are there any collection accounts outstanding, or which have been outstanding within the last 12 months, with no satisfactory arrangements for payment, no matter what their age, as long as they are currently due and payable? (If yes, complete Section D) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. Has the applicant had two or more rent payments paid 30 days or more past due that have occurred within the last 2 years? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 10. Has the applicant had any non-Agency debts written off within the last 36 months? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 11. Has the applicant had any debts to the Rural Housing and Community Development Service or the Farmers Home Administration debt settled? (If yes, complete section C) | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Section B - Credit History

Account name

Times delinquent

Days delinquent

Were circumstances beyond the applicant's control? (If yes, give a brief explanation.)

Section C - Bankruptcies, foreclosures or judgments

Bankruptcies - Date of last occurrence _____ Were circumstances beyond the applicant's control? _____
(If yes, give a brief explanation.)

Foreclosures - Date of last occurrence _____ Were circumstances beyond the applicant's control? _____
(If yes, give a brief explanation.)

Judgments - Date of last occurrence _____ Were circumstances beyond the applicant's control? _____
(If yes, give a brief explanation.)

Debt settlement of RHCDS or FmHA loans - Date of occurrence _____ Were circumstances beyond the applicant's control or, will or have the conditions necessitating the debt settlement be removed by making the loan? _____
(If yes, give a brief explanation.)

Section D - Outstanding court created obligations, tax liens, delinquent government loans and collection accounts

Date _____	Amount owed _____
Date _____	Amount owed _____
Date _____	Amount owed _____

Section E - Credit history evaluation

Determine whether the failure to pay debts when due indicates a pattern of unacceptable credit handling. Review those delinquent accounts, events, and chargeoffs over which the applicant had control. Is the failure to pay debts when due an indication of unacceptable credit handling?

Summarize your decision as to why this is adverse credit.

Section F - Summary evaluation of the applicant's credit history

Circle one or more of the following that apply and indicate credit acceptability in item (f).

- a. The applicant has no credit history
- b. The applicant has no adverse credit history
- c. The applicant has experienced adverse credit history, but I have determined that the handling of the delinquent account was beyond the applicant's control
- d. The applicant has an outstanding tax lien or a delinquent Government loan with no satisfactory arrangements for payment.
- e. The applicant shows a pattern of unacceptable credit handling
- f. The applicant has _____ Acceptable credit history _____ Unacceptable credit history

Name and Title of Loan Approval Official

(Date)